



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE****Commissioner for Patents**
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7590 02/19/2003

TAROLLI SUNDHEIM COVELL
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526 SUPERIOR AVENUE
CLEVELAND, OH 441141400

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Richard Kline	(Depositor's name)
<i>[Signature]</i>	(Signature)
5-9-03	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/371,776	08/10/1999	DOUGLAS P. CAMPBELL	TRW(VSSIM)42	9645

TITLE OF INVENTION: INFLATOR FOR INFLATABLE VEHICLE OCCUPANT PROTECTION DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$0	\$0	\$0	05/19/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
DUNN, DAVID R	3616	280-737000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Tarolli, Sundheim, Covell
& Tummino L.L.P.

2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

TRW Inc.

Lyndhurst, Ohio

TRW Vehicle Safety Systems Inc.

Lyndhurst, Ohio

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-0090 (enclose an extra copy of this form).

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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May 9, 2003

A check for \$1363.00 to cover issue fee (\$1300.00) and 21 soft copies (\$63.00) was mailed to the PTO on January 17, 2003 for this application.

01 FC:1501

Thomson Tarolli
Reg. No. 20,177

TRANSMIT THIS FORM WITH FEE(S)